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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

13

Application Number

10/695,243

Filing Date

October 27, 2003

First Named Inventor

Hamilton

Art Unit

1636

Examiner Name

Guzo

Attorney Docket Number

GFI-109

ENCLOSURES (Check all that apply)

☒ Fee Transmittal Form

☐ Fee Attached

☒ Amendment/Reply

☐ After Final

☐ Affidavits/declaration(s)

☒ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☐ Response to Missing Parts/
Incomplete Application

☐ Response to Missing Parts
under 37 CFR 1.52 or 1.53

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a
Provisional Application

☐ Power of Attorney, Revocation
Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) _____

☐ After Allowance Communication
to Technology Center (TC)

☐ Appeal Communication to Board
of Appeals and Interferences

☐ Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☐ Other Enclosure(s) (please
Identify below):

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Name

John David Reilly

Registration No. (Attorney/Agent)

43,039

Signature

Date

1/23/2007

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on this date: January 23, 2007

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name

Nancy E. Yorke

Signature

Date

January 23, 2007



Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PATENT
CASE NO. GFI-109

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: HAMILTON

Serial No. 10/695,243

Filed October 27, 2003

Group Art Unit 1636

Examiner Guzo

For: ENDOMANNOSIDASES IN THE MODIFICATION OF
GLYCOPROTEINS IN EUKARYOTES

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

☐ The fee has been calculated as shown below.

CLAIMS AS AMENDED

(1)	(2) Claims remaining after amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims	* <u>38</u>	-	** <u>51</u> =	<u>0</u> X	\$50	= <u>0.00</u>
Independent Claims	* <u>4</u>	-	*** <u>4</u> =	<u>0</u> X	\$200	= <u>0.00</u>
Multiple Dependent Claims					\$360 ****	= <u> </u>
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT →						0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

**** Add this fee only if application is amended to include multiple dependent claims (regardless of number) and no multiple dependent claims were originally filed.

Charge \$ 0.00 to Deposit Account No. 13-2755. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2755. A duplicate copy of this sheet is enclosed.

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By MERCK & CO., INC. Date 1/23/2007

Respectfully,

By: John David Reilly

Attorney for Applicant(s)

Reg. No. 43,039

MERCK & CO., INC.
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P.O. Box 2000
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Date: January 23, 2007

IN DUPLICATE